

Submit 3 Copies To Appropriate District Office
District I
 1625 N. French Dr., Hobbs, NM 88240
District II
 1301 W. Grand Ave., Artesia, NM 88210
District III
 1000 Rio Brazos Rd., Aztec, NM 87410
District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 May 27, 2004

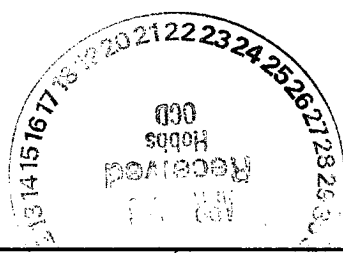
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other INJECTOR		WELL API NO. 30-025-23885 5. Indicate Type of Lease FEDERAL <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> 6. State Oil & Gas Lease No.
2. Name of Operator PHOENIX HYDROCARBONS OPERATING CORPORATION		7. Lease Name or Unit Agreement Name LANGLIE JAL UNIT 8. Well Number 065- WFW
3. Address of Operator P O BOX 3638, MIDLAND, TX 79702		9. OGRID Number 188483 10. Pool name or Wildcat LANGLIE MATTIX, 7 RVRSQ
4. Well Location Unit Letter <u>N</u> : <u>1980</u> feet from the <u>WEST</u> line and <u>660</u> feet from the <u>SOUTH</u> line Section <u>5</u> Township <u>25S</u> Range <u>37E</u> NMPM LEA County NM		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3202 GR		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: REACTIVATE <input checked="" type="checkbox"/>		OTHER: MIT TEST <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

3/22/06 PRESSURE TESTED WELL AS PER ATTACHED CHART, PACKER @ 3260'. APPROVED BY BUDDY HILL WITH OCD. THIS WELL WILL BE ACTIVATED AND PUT BACK INTO INJECTOR STATUS.



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

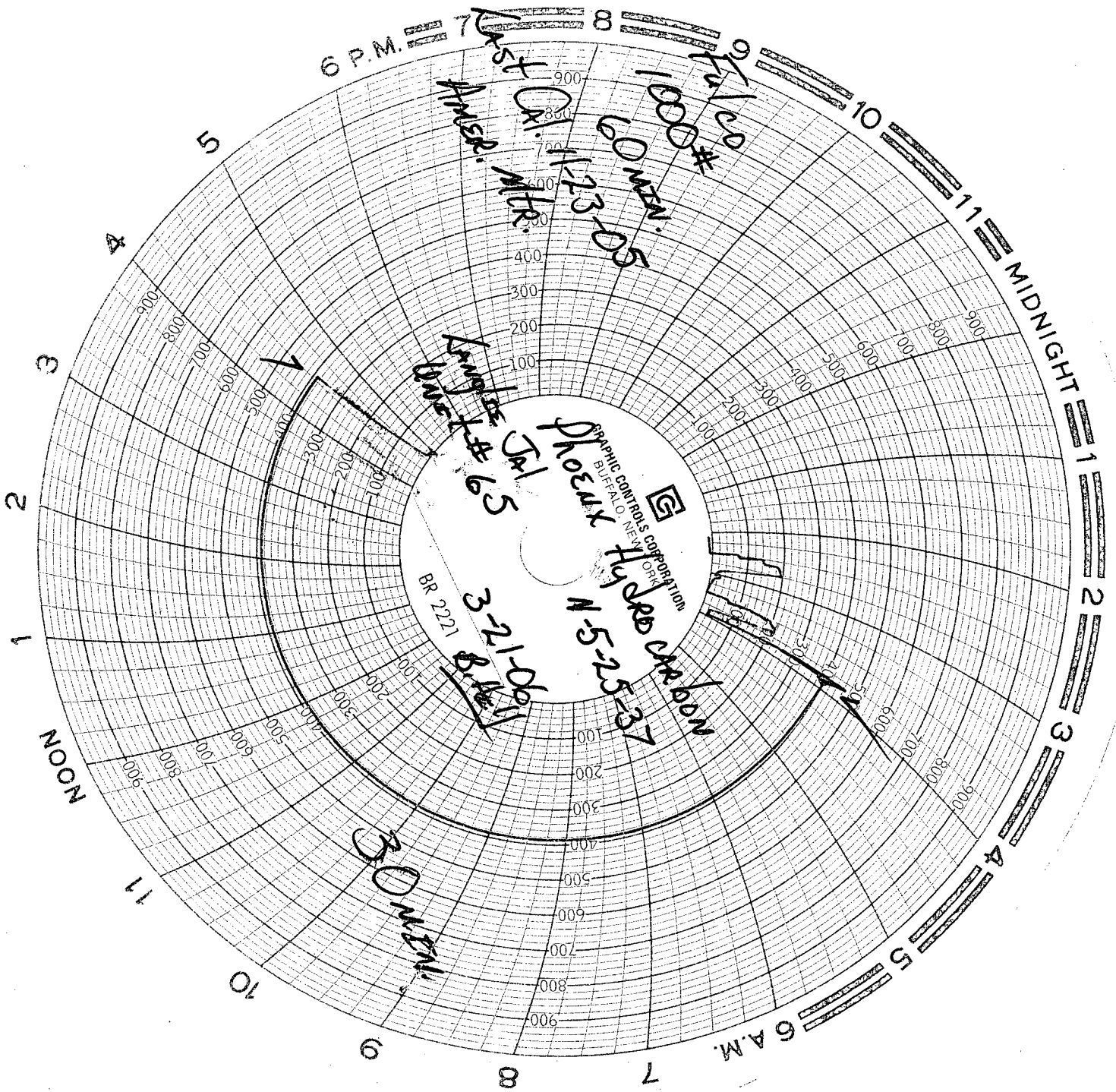
SIGNATURE Phyllis R. Gunter TITLE AGENT DATE 4/3/06

Type or print name Phyllis R. Gunter E-mail address: PHYGUN@AOL.COM Telephone No. 432-686-9869

For State Use Only APPROVED BY: Larry W. Wink TITLE **OCD FIELD REPRESENTATIVE II/STAFF MANAGER** DATE _____

Conditions of Approval (if any):

APR 06 2006



6 P.M.

1000#
60 MEN
11-23-05
ANSER. MTR.

JAL 165
3-21-06
BR 2221
Hydro Carbon
M-5-23-07


30 MEN

GRAPHIC CONTROLS CORPORATION
BUFFALO NEW YORK

NOON

6 A.M.

MIDNIGHT

 The sender of this message has requested a read receipt. [Click here to send a receipt.](#)

Mull, Donna, EMNRD

From: Phillips, Dorothy, EMNRD
To: Mull, Donna, EMNRD
Cc:
Subject: RE: Financial Assurance Requirement
Attachments:

Sent: Thu 4/6/2006 11:05 AM

They have a blanket and do not appear on Jane's list.

From: Mull, Donna, EMNRD
Sent: Thursday, April 06, 2006 9:23 AM
To: Phillips, Dorothy, EMNRD
Cc: Macquesten, Gail, EMNRD; Sanchez, Daniel J., EMNRD
Subject: Financial Assurance Requirement

Dorothy,

Is the Financial Assurance Requirement OK for:

Phoenix Hydrocarbons Operating Corp (188483)